



COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION
(Page 1)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

QUICK ADJUST SUPPORT SYSTEM WITH TRAPPED OR INTEGRAL WEDGE

the specification of which ☐ is attached hereto ☒ was filed on November 14, 2003
as Application No. 10/713,235
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(e) of any provisional application for patent or inventor's certificate listed below and have also identified below any provisional application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

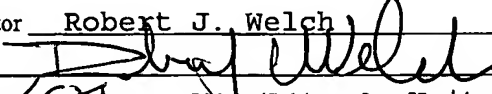
<u>Country</u>	<u>Application No.</u>	<u>Filed (Day/Mo./Yr.)</u>	<u>(Yes/No)</u> <u>Priority Claimed</u>
U.S.	60/426,009	14/11/02	Yes

I hereby appoint the practitioners associated with the firm and Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to the address associated with that Customer Number:

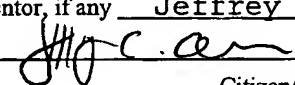
FITZPATRICK, CELLA, HARPER & SCINTO
Customer Number: 05514

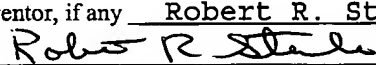
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

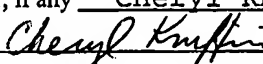
**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**
(Page 2)

Full Name of Sole or First Inventor Robert J. Welch
Inventor's signature 
Date 3/31/04 Citizen/Subject of United States
Residence Dallas, Pennsylvania 18612
Post Office Address RD 1, 4 Meadows Drive

Full Name of Second Joint Inventor, if any James D. Hill
Second Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Tolland, Connecticut 06084
Post Office Address 783 Old Stafford Road

Full Name of Third Joint Inventor, if any Jeffrey C. Olson
Third Inventor's signature 
Date 3-31-04 Citizen/Subject of United States
Residence Dallas, Pennsylvania 18612
Post Office Address 22 Idlewood Drive

Full Name of Fourth Joint Inventor, if any Robert R. Steele
Fourth Inventor's signature 
Date 3/31/04 Citizen/Subject of United States
Residence Sweet Valley, Pennsylvania 18656
Post Office Address 782 State Route 29

Full Name of Fifth Joint Inventor, if any Cheryl Kniffin
Fourth Inventor's signature 
Date 3/31/04 Citizen/Subject of United States
Residence Mountaintop, Pennsylvania 18707
Post Office Address 23 Lee Avenue

Full Name of Sixth Joint Inventor, if any Katherine McGillivray
Fourth Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Marshall, Minnesota 56258
Post Office Address 708 Marquerite Avenue

COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION
(Page 2)

Full Name of Sole or First Inventor Robert J. Welch
Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Dallas, Pennsylvania 18612
Post Office Address RD 1, 4 Meadows Drive

Full Name of Second Joint Inventor, if any James D. Hill
Second Inventor's signature James D. Hill
Date 1 Apr, 2004 Citizen/Subject of United States
Residence Tolland, Connecticut 06084
Post Office Address 783 Old Stafford Road

Full Name of Third Joint Inventor, if any Jeffrey C. Olson
Third Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Dallas, Pennsylvania 18612
Post Office Address 22 Idlewood Drive

Full Name of Fourth Joint Inventor, if any Robert R. Steele
Fourth Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Sweet Valley, Pennsylvania 18656
Post Office Address 782 State Route 29

Full Name of Fifth Joint Inventor, if any Cheryl Kniffin
Fourth Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Mountaintop, Pennsylvania 18707
Post Office Address 23 Lee Avenue

Full Name of Sixth Joint Inventor, if any Katherine McGillivray
Fourth Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Marshall, Minnesota 56258
Post Office Address 708 Marguerite Avenue

**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**
(Page 2)

Full Name of Sole or First Inventor Robert J. Welch
Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Dallas, Pennsylvania 18612
Post Office Address RD 1, 4 Meadows Drive

Full Name of Second Joint Inventor, if any James D. Hill
Second Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Tolland, Connecticut 06084
Post Office Address 783 Old Stafford Road

Full Name of Third Joint Inventor, if any Jeffrey C. Olson
Third Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Dallas, Pennsylvania 18612
Post Office Address 22 Idlewood Drive

Full Name of Fourth Joint Inventor, if any Robert R. Steele
Fourth Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Sweet Valley, Pennsylvania 18656
Post Office Address 782 State Route 29

Full Name of Fifth Joint Inventor, if any Cheryl Kniffin
Fourth Inventor's signature _____
Date _____ Citizen/Subject of United States
Residence Mountaintop, Pennsylvania 18707
Post Office Address 23 Lee Avenue

Full Name of Sixth Joint Inventor, if any Katherine McGillivray
Fourth Inventor's signature Katherine McGillivray
Date _____ Citizen/Subject of United States
Residence Marshall, Minnesota 56258
Post Office Address 708 Marguerite Avenue